

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>12706</u>	2. Fiscal Year Covered From: <u>11</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>KEVIN</u> <u>HICKS</u> P.O. Box, Bldg., Room No., if any <u>SUITE 1</u> Street <u>27 WAREHOUSE ROW</u> City <u>ALBANY</u> State <u>N.Y.</u> ZIP Code + 4 <u>12205</u>	4. Name, file number, and address of labor organization. Name <u>EMPIRE STATE REGIONAL COUNCIL CARPENTERS</u> Labor Organization File Number <u>038392</u> P.O. Box, Building and Room Number, if any <u>SUITE 1</u> Street <u>27 WAREHOUSE ROW</u> City <u>ALBANY</u> State <u>N.Y.</u> ZIP Code + 4 <u>12205</u>
5. Position in labor organization. <u>VICE PRESIDENT</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>EMPIRE STATE CARPENTERS</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>270 MOTOR PARKWAY</u> City <u>HAUPPAUGE</u> State <u>N.Y.</u> ZIP Code + 4 <u>11788-5150</u>	7.a. Nature of Interest, Transaction, or Income. <u>NYS LABOR MANAGEMENT COUNCIL</u> <u>TRUSTEE STIPEND</u> 7.b. Amount. <u>1500.00</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Kevin R. Hicks

On

8-15-05

Date

518-459-7182

Telephone Number

Name of Person Filing

Kevin Hicks

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

14.b. Amount of payment. 13.b. Is the Business an Employer ☒or Consultant ☐ ?

Name of Person Filing

Kevin Hicks

File Number U-

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11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

2/16/04 Dinner 88
 2/17/04 Golf 80
 6/21/04 Golf 125
 12/2/04 Golf 160
 12/22/04 Lunch 42
 entertainment at various meetings

13.b. Is the Business an Employer ☐ or Consultant ☒ ?14.b. Amount of payment.

495

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12.b. Amount.

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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

Dinner & Entertainment at various functions

2/17/04 - Dinner (2)	168
2/19/04 Golf & Lunch	118
3/30/04 Lunch	10
4/2/04 Dinner	64
7/19/04 Golf	63
7/19/04 Dinner	87
12/16/04 Dinner (2)	80

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

 590

Name of Person Filing

Kevin Hicks

File Number U-

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☐ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name MARVIN AND COMPANY, P.C.Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 11 British American BlvdCity LATHAMState N.Y. ZIP Code + 4 12110

14.a. Nature of payment.

14.b. Amount of payment. 13.b. Is the Business an Employer ☒ or Consultant ☐ ? 27.00

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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- ☐ c. Employer

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11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

MEALS/ENTERTAINMENT @ 4M Meetings	
11/24/04 Dinner	76
11/23/04 Golf	150
11/23/04 Lunch	88
11/23/04 Dinner	85
10/2/04 ENT.	125
10/2/04 Golf	140

14.b. Amount of payment.

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

Name of Person Filing

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name _____

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

- ☐ a. Labor Organization
- ☐ b. Trust
- ☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name _____

Trade Name, if any: [REDACTED]

P.O. Box, Bldg., Room No., if any

Street

City State ZIP Code + 4


11.a. Nature of such dealing.



11.b. Approximate dollar value of such dealing.

THE UNIVERSITY OF CHICAGO

12.a. Nature of interest held or income received.



12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant
(including trade name, if any).

Name Carpenters Local 370 Benefit Plans

Trade Name, if any: [REDACTED]

P.O. Box, Bldg., Room No., if any

Street 27 WAREHOUSE (Row)

City ALBANY

State N.Y. ZIP Code + 4 12205

14.a. Nature of payment.

Reimbursement of EXPENSES to
 Conference :

8/4/04	INTERNATIONAL FOUNDATION	Airfare	# 242
10/8/02	"	"	adj. 36
9/30-10/6/04	Educational Seminar		
	Air Hotel Expenses	}	# 2426

14.b. Amount of payment.

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

Name of Person Filing

KEVIN HICKS

File Number U-

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Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

Committee Meeting Expenses	
11/19/04	76.00
4/15/04	90.00
8/9/04	32.00

13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

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Name of Person Filing

Kevin Hicks

File Number U-

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Name of Person Filing

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13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

MEALS & ENTERTAINMENT - Meetings		
11/3/04	Dinner (2)	185
5/27/04	Golf	60
12/1/04	Golf	210

14.b. Amount of payment. 13.b. Is the Business an Employer ☐ or Consultant ☒ ?